PROVIDER MDCH INQUIRER

September 1st, 2007

Featured Articles

Electronic Claims

Medicaid encourages all providers to submit claims electronically because it expedites claim processing and adjudication. We know there are many questions and hesitations from those who have not made the decision to transmit claims electronically. Here are some frequently asked questions about electronic vending.

Q. How will transmitting claims electronically help?
A. Claims transmitted electronically take about 2 weeks to process and appear on a remittance advice. There is less chance of processing errors, so less chance for claim rejections.

Q. What about billing secondary claims?
A. Most vendors have the capability to transmit secondary claims. A benefit of billing secondary claims is the electronic system does not require a copy of the primary payers EOB. The other insurance information is reported to our system with the use of CAS codes, included in the electronic file. Check with your vendor to see what is required to submit secondary claims electronically.

Q. What about documentation?
A. For institutional claims, documentation can be sent by mail to: UB Attachments, P.O. Box 30732, Lansing, MI 48909 (prior to electronically transmitting), include "documentation on file" in the remarks section of your electronic came and it will be attached electronically. For providers in Livingston, Macomb, Monroe, Oakland, St. Clair, Wayne and Washtenaw counties, we are offering a free pilot program called Documentation EZ Link where documentation can be faxed or emailed and attached to the electronic claim. Information for Documentation EZ Link can be found on our website.

Q. Does Medicaid offer software?
A. Unfortunately, we do not at this time. This will be addressed further thru CHAMPS.

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Q. Where can I get information and a list of approved vendors?
A. A list of approved vendors and additional information is on our website at
www.michigan.gov/medicaidproviders >> Electronic Billing.

Q. What is a billing agent?
A. Medicaid considers a billing agent anyone who submits your claims electronically
directly to Medicaid.

Q. What should I look for when choosing a vendor or billing agent?
A. It is a good idea to compare at least 3 different vendors, before making a decision. Find
out if you receive an electronic remittance advice from the vendor. Does the vendor transmit
multiple provider types, (10-30-40-12). What billing agent does the vendor transmit their
claim to before they enter our system? Do they successfully transmit secondary or tertiary
claims? Has this vendor ever tested claims in our system, have they tested secondary claims?
Does your billing agent give you an acknowledgement report showing how many claims
were transmitted to and received by Medicaid?

Q. How does Medicaid know I have a billing agent?
A. The billing agent will have the provider complete an agreement linking the billing agent
with the provider.

Q. Can a Provider have more than one billing agent?
A. Yes they can, Medicaid allows multiple billing agents on file.

Q. Is there a cost?
A. Each vendor is independent; the cost should be investigated before making your decision.
You should also evaluate if there is a fee for resubmitting a claim.

It is a good idea to get references from another provider that transmits claims to Michigan
Medicaid. If you have any questions or concerns for billing electronically please contact EDI
Support at AutomatedBilling@michigan.gov.

Find a Billing Agent to submit your claims electronically today!!!

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Proposed Medicaid Changes

Below are the proposed Policy Bulletins that are posted online and due in July. Please review them online at www.michigan.gov/medicaidproviders >> Proposed Medicaid Changes.

Comment Due Date	Notice Number	Subject
September 21, 2007	0731-Pharm	Elimination of Unit Dose Fee Reimbursement
September 14, 2007	0729-Pharm	Refill Restriction for Narcotic Analgesics
September 13, 2007	0728-Dental	Revisions to the Dental Prior Authorization Form (MSA-1680-B)

THE CHAMPS CORNER
Community Health Automated Medicaid Processing System

Group Information Forms

All providers are being asked to revalidate current Provider Enrollment information when the CHAMPS Provider Enrollment subsystem is live. To ensure for a smooth transition, MDCH is attempting to update some of its Provider Enrollment Information. MDCH recently mailed a letter to many providers requesting some basic information. If you received the letter we strongly encourage you to complete the form and return it to MDCH. Once MDCH has received the form, you can expect to receive a spreadsheet of all your group and individual provider information that we have in the file today.

Some providers may have received this letter more than once due to errors in the first mailing. If you have already filled out the Group Information form and returned it to MDCH, please disregard the extras. If you have not received the form and would like to fill it out, it can be found online at www.michigan.gov/medicaidproviders >> CHAMPS.

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MDCH staff has been traveling throughout the State preparing providers for revalidation. MDCH is also implementing a new CHAMPS hotline to answer any CHAMPS related questions. That hotline is now fully functional and it has been set up to field any CHAMPS related questions, focusing on the Provider Revalidation. This phase of the project is scheduled to take place in February of 2008. If you have any CHAMPS related questions please contact the CHAMPS hotline at 1-888-643-2408 or you can email your questions to champs@michigan.gov.

Thanks to valuable provider and staff input gathered at Provider Revalidation Training Sessions. MDCH has already made some minor adjustments that should prove rewarding when revalidation begins. For all CHAMPS updates including the Group Information form and the new electronic signature document mentioned in last months article please log on to www.michigan.gov/medicaidproviders and click on the CHAMPS link. Please keep in mind the electronic signature document is there for you to keep in your files. This is an agreement between you and your providers to access and enter information on behalf of your providers. MDCH does not need you to submit the form to Provider Enrollment.

If you have not already attended a CHAMPS training, please register for one in your area today. For a list of trainings throughout the state please log on to www.michigan.gov/medicaidproviders and click on Medicaid Provider Training Sessions.

New Policy Bulletins Posted

The bulletin below was published during the previous month. It is very important that all providers are aware of new Policy Bulletins that are published. All applicable Policy Bulletins will be incorporated into the new quarter of the updated Medicaid Manual.

Issue Date	Bulletin Number	Subject
August 2, 2007	MSA 07-42	Quality Assurance Supplement Reduction

To view the new policy bulletins online you can visit www.michigan.gov/medicaidproviders >> Medicaid Policy Bulletins. If you have any questions on the Policy Bulletins above, please contact Provider Inquiry at 1-800-292-2550 or ProviderSupport@michigan.gov.

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NPI Countdown Column

NPI BECOMES MANDATORY OCTOBER 1

Effective October 1, 2007, MDCH will require the NPI to be reported on FFS claims sent either electronically or on paper for dental/professional/institutional claim formats based on the date of receipt. The Medicaid legacy provider number is no longer required to be reported on the claim. MSA Policy Bulletin **MSA 07-48** gives a detailed outlook on the entire billing process that is to take place with the implementation of the NPI.

Within **MSA 07-48,** four new legacy edits are defined. These edits will show on Remittance Advices if the NPI is not on the claim form. These new edits will result in claim rejection. Please read through Bulletin **MSA 07-48,** so you can be prepared and informed prior to October 1, 2007.

CMS will be disseminating provider NPI information contained within the NPPES file beginning September 4, 2007. This file will be available for download or as a query-only database referred to as the NPI Registry and can be accessed at http://www.cms.hhs.gov/NationalProvIdentStand/06a_DataDissemination.asp. This site will be very helpful in the

obtaining of referring or ordering NPI's to be reported on claims.

If you have a Group NPI and have not reported it to Medicaid there could be a lapse in your Medicaid payments. MDCH needs you to report your group NPI through our NPI Collection Tool which is located within Single Sign-On (SSO) at https://sso.state.mi.us. This will ensure that MDCH can recognize and validate your NPI when it is reported on a Medicaid claim.

Without your Group NPI number on file, your information could also be converted incorrectly during CHAMPS provider revalidation. To ensure that revalidation of your provider(s) is quick, clear, and easy, report your Group NPI(s) today. For more information of the Provider Revalidation portion of CHAMPS please log on to www.michigan.gov/medicaidproviders >>CHAMPS.

If you have a Group NPI number, report it to Medicaid today!